## MULTIPLE DEPENDENT CLAIM FEE CALCUL N SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/523( APPLICANT(S)

FILING DATE

## CLAIMS

1		AS FILED		AFTER 1"AMENDMENT		AFTER 2 MANENDMENT			AS FILED		AFTER SAMENDMENT		AFTER 2 MAMENDMENT	
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